ADAMS COUNTY HOME PURCHASER PROGRAM APPLICATION



IN ORDER TO APPLY FOR THE HOUSING PROGRAM, PLEASE FILL OUT THE ATTACHED APPLICATION. Photocopies of the following must be submitted with the application:

A copy of each working household member's 2009 Federal Income Tax Forms (NOT W-2'S)
If you are self-employed, make sure to include all schedules. Contact the Administrator if
you do not file income taxes. Copies to verify other income sources will also be required.
(Social Security Statement, Pension Statement, Child Support, etc.)

A copy of all employed household member's most recent pay check stub showing **gross year-to-date** earnings. Please provide a start date if the household member started a new job within the last year.

Once you have purchased a home we will need proof of your homeowners insurance and a copy of your closing statement and mortgage.



I have received a copy of the pamphlet "Protect Your Family From Lead In Your Home" with this application. (please check one)

YES	NC)

ARE YOU A U.S. CITIZEN OR A QUALIFIED ALIEN? ____YES _____NO (YOU MUST CHECK ONE)

Are there any loan fees that apply?

Yes. There is a \$13 fee to record your mortgage and \$250 in project review fees. These fees are included in your loan.

Return application to:

Adams County Housing Program
C/O Sue Koehn
201 Corporate Drive
Beaver Dam, WI 53916

Phone: 800-552-6330 Fax: 920-887-4250

Email: skoehn@msa-ps.com

ADAMS COUNTY HOME PURCHASER PROGRAM APPLICATION

Office Use Only:	Application Nu	umber	Date F	Received	
All information conta Please fill out all 3 p		pplication is strictly cor d back).	nfidential.		
Applicants Name:					
Social Security Nu	mber:			Age:	
Co-Applicants Nar (Note: If you have		significant other living	with you, p	olease list here.	
Social Security Nu	mber:			Age:	
Current Street Add		Street Address	City	State	Zip
Mailing Address: (i	f different)	Street Address	City	State	Zip
Phone Number: (H	lome)	(Work)	:	(Cell)	
Email Address:		Can we	contact you	u via email? (circle	one) Yes No
Total People Who	Will be Living	g in this Home:			
Children who resid	e in the hous	se at least 50% of the	time:		
Name of C	hild	Age		Social Securi	ty Number
You are not requi answer them, ple		er the questions be ere	low on this	s page. If you ch	noose not to
Head of Household	d:I	aleFemale MaleFemale hold handicapped? `	Marita	al Status of Applic	ant:
Asian American	can Americar Indian/Alask	n	Asian Black Ameri Black Hasid	can Indian/Alaskan N & White /African Americar ican Indian/Alaska /African Americar lic Jews ace of Order	n & White an Native &

Please list the income of all persons <u>18 years of age or older</u> (not including full time students.) Income includes gross wages, salaries, commissions, net income from self-employment, net income from the operation of real property, interest, dividend, Social Security, SSI, Pension, AFDC, Alimony, Child Support and any other benefit income.

Name of Household	Name of Employer or	Start Date	Monthly Gross
Member	Source of Income		Income

CHILD SUPPORT

Does any household member receive child support? (circle one) yes or no

- If yes, how often? (circle one) weekly, bi-weekly or monthly
- If yes, please attach documentation.

Does any household member pay child support? (circle one) yes or no

- If yes, please attach documentation.

MISCELLANEOUS INFORMATION: Regularly Reoccurring Medical Expenses: \$ Are you currently renting? (circle one) yes or r Have you owned a home in the last 3 years? (ci	10
INFORMATION ABOUT THE HOME YOU WOU (If you do not have a specific home you are purchas	
Address of property interested in purchasing: Have you applied for financing? (circle one) yes or If yes, from what lending institution?	no
Name(s) that will be on the Title to the House:	
Purchase Price: \$ Approxim	ate amount of mortgage: \$
Year the house was built:	
HOMEOWNERS INSURANCE Name of Insurance Co.: Policy Number: Phone Number of agent:	

IMPROVEMENTS NEEDED (Check all that apply)

Roof	Insulation	Interior Walls	
Exterior/Siding/Painting	Furnace	Water Heater	
Plumbing	Foundation	Doors	
Wiring/Electrical	Windows	Porch	
Chimney Repair	Other (explain)	Other (explain)	

^{**}Only work that is considered essential and necessary will be permitted. All Lead Based Paint Hazards will need to be corrected. Hazards will be determined upon an initial project assessment of your home. The assessment will include your entire home.

CONFLICT OF INTEREST Do you have any family or business ties to any of the following people? Yes_ No Susan Koehn, Housing Program Specialist Kari Justmann, Team Leader Stacy Griswold, Housing Program Assistant Al Sebastiani, County Board Chair Cindy Phillippi, County Clerk Steve Gilman, Committee Member Terry James, Committee Member Tom Feller, Committee Member John West, Committee Member Dick Wirth, Committee If yes, disclose the nature of the relationship: Names of covered person I/We. the undersigned owners of the described property, certify that the above statements are true, complete and accurate to the best of my/our knowledge, and understand that false information given may lead to disqualification from this program. I fully understand that it is a federal, state and local crime punishable by fine or imprisonment or both, to knowingly make any false statements concerning the facts of the application. I/We hereby authorize the Municipality to obtain verification of any information contained in this application from any source named herein. We have given our permission to the Adams County Housing Program to request and receive information required to verify employment, mortgages, deed, trust accounts, savings accounts, credit accounts, financial status and any other information necessary to complete application for a Loan. I/We authorize a Lead Hazard Review of my/our property. I/We agree that results will be used to determine the scope of my project and that soil sampling will not take place. No provision of marital property agreement (including a Statutory Individual Property Agreement Pursuant to Sec. 766.587, Wis. Stats.), unilateral statement classifying income from separate property under Sec. 766.59, or court decree under Sec. 766.70 adversely affects the creditor unless the creditor is furnished with a copy of the document prior to the credit transaction or has actual knowledge of its adverse provisions at the time of obligation is incurred. I/We certify that all information contained in this application is true and complete to the best of (my) (our) knowledge and belief. It is understood that this information is given for the purpose of obtaining financial assistance through the Home Purchaser Program and will be used for no other purpose. Date: (Signature of applicant)

(Signature of applicant)

Date:

ADAMS COUNTY HOME PURCHASER PROGRAM

The Community Development Block Grant (CDBG) program can help make the dream of owning your own home a reality.

How do I qualify?

You must be Low- to Moderate- Income. If you currently own your own home, you are not eligible for this program. The Low- to Moderate- Income guidelines for Adams County are:

Family Size	Income Limit	Family Size	Income Limit
1	\$32,750	5	\$50,550
2	\$37,450	6	\$54,300
3	\$42,100	7	\$58,050
4	\$46,800	8	\$61,800

How can the program assist you in purchasing a home?

Down payment and closing costs are available in the form of a 0% deferred payment loan. No payments are made and the funds are paid back to the program when the owner no longer lives in or owns the home.

Are there any restrictions on the location or type of home I purchase?

All homes purchased must be located within the Adams County. The homes also must be vacant or occupied by the seller or buyer. You should look for a home that does not have peeling or deteriorated paint. State regulations for lead-based paint may make purchasing a home with paint problems unfeasible.

How much money is available?

CDBG funds can pay for up to $\frac{1}{2}$ of a reasonable down payment, not to exceed 10% of the purchase price. It may also be possible to use rehab as equity for down payment. The program can also pay for eligible closing costs, not to exceed \$2,500 (NOTE: pre-paid taxes and insurances are not eligible closing costs). There will also be funds available to do rehab to the home that is purchased.

Do I still need to go to a bank?

Yes, you will need to get financing for your mortgage. Typically, the interest rate should not be more than 2% above the current interest rate offered by local lenders in your area. (These higher interest rate purchases will need committee approval and may require additional credit documentation from the purchaser(s).) Please be aware that the committee meets only 1 time per month and these projects may require additional approval time. We may not be able to fund your project under this program if the interest rate is too high.

How much money will I be required to have toward the down payment?

It will depend upon the amount the bank is requiring, but this program requires that you have at least \$1,000 of your own money to go toward the purchase. Earnest money can be applied to the \$1,000.

What is the most I can receive?

The most you can receive will depend upon the repairs needed to the home that is purchased. Each project is considered on a case-by-case basis.

Counseling Requirement

All participants in the CDBG Program will be required to receive home purchaser counseling. Counseling will be provided one-on-one with each applicant by program staff.